Frequently Asked Questions regarding POLST

Is the POLST a Do-Not-Resuscitate form?

Not specifically, but it communicates patient preferences and physician orders for resuscitation if the patient suffers a cardiopulmonary arrest.

What other preferences are recorded?

Medical interventions, divided into three levels: Comfort measures only, Limited Additional Intervention, and Full Treatment. Please see the POLST form for specifics.

Is the POLST aimed just at prehospital care?

No! The POLST contains valuable information for care takers at all levels. The POLST contains information important to emergency department, in patient, and other health care personnel.

What is the official POLST form?

The official form will be determined by the state EMS Authority and posted on their website. The form is still in approval process as of December, 2008.

Will the previous state DNR form still be effective?

Yes, previous forms should be honored. The current DNR form may still be completed and used. The state will evaluate whether the POLST should completely replace the current DNR form, but would take legislation and will not occur in the near future.

Where can POLST forms be obtained?

The California EMS Authority website should be monitored for official versions (<u>www.emsa.ca.gov</u>). The POLST may also be obtained from <u>www.polst.org</u>.

How strong is the liability protection for following instructions in a POLST?

The protection is strong. Specifically the law says, "A health care provider who honors a request regarding resuscitative measures is not subject to criminal prosecution, civil liability, discipline for unprofessional conduct, administrative sanction, or any other sanction, as a result of his or her reliance on the request ..."

Should a POLST from another state be recognized?

Yes, the law provides for recognition of similar documents.

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What if someone has a POLST with the "Do Not Transfer" provision checked?

EMS should not replace adequate home or institutional care. Generally EMS transports patients, but if "Do Not Transfer" is checked an effort should be made to keep the patient at home or in their care location. Consult with the Base Hospital.

What about BVM ventilation?

BVM ventilation would be used for patients who check "Limited Additional Interventions" or "Full Treatment." Endotracheal intubation would be limited to patients requesting "Full Treatment."

Why does the original POLST form have a section for antibiotics, but the EMS form does not?

State EMS decided to incorporate antibiotic preferences into the Medical Intervention section, rather than have it separate.

If the patient has multiple forms, which one should be recognized?

Recognize the most recent form completed. Contact the Base Hospital for assistance.

What if the physician has not signed the form?

Contact the Base Hospital. The form is not legally effective if not signed by the physician, but the Base can use it as an indication of patient preferences and desires.

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